

# Best Available Copy

ISSUE SLIP STAPLE AREA (for internal cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER	1112	61650	3/6/58
FORMALITY REVIEW		68188	4/25/58

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 □ ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/1/58
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41	✓	✓	1/1/58
42	✓	✓	1/1/58
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50	✓	✓	1/1/58

Claim	Final	Original	Date
51	✓	✓	1/1/58
52	✓	✓	1/1/58
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56	✓	✓	1/1/58
57	✓	✓	1/1/58
58	✓	✓	1/1/58
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61	✓	✓	1/1/58
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Claim	Final	Original	Date
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If more than 150 claims or 10 pages  
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